

Introduction

This Second 2010 Biannual Report on the implementation of the Veterans and Human Services (VHS) Levy has been developed in response to the 2010 Adopted King County Budget (Ordinance 16717, Sections 72 and 73), approved by the Metropolitan King County Council in November 2009. Proviso one of Section 72 pertaining to the Veterans Levy Fund states:

"Of this appropriation, \$100,000 shall not be expended or encumbered until the executive submits two biannual progress reports for the veterans and human services levy. The biannual progress report shall contain at a minimum: the amount of funding expended to date, the amount of funding contracted to date, the number and status of request for proposals to date, any individual program statistics for each of the overarching levy strategy areas as defined by the veterans and human services levy service improvement plan that was adopted by Ordinance 15632 and the geographic distribution of levy resources across the county, including numbers of individuals served by jurisdiction. The biannual reports are due on April 30 and August 30. The first report due April 30, 2010 shall include data from November 2009 to March 31, 2010. The second report due August 30 shall include data from April 1, 2010, to August 1, 2010."

A similar proviso in Section 73 pertains to the Human Services Levy Fund, with identical requirements and timelines.

This report includes a summary of the VHS Levy funding expended through June 30, 2010; funding committed through the end of second quarter 2010 via contracts, memoranda of agreement or other means; the status of Requests for Proposals (RFP) to date; any individual program statistics for the overarching levy strategy areas; and the geographic distribution of levy resources across the county, including numbers of individuals served by jurisdiction. This report contains as much service data as is available for the period January 2010 through June 2010.

In 2009, three of the levy quarterly reports offered a focused look at the progress on one of the five overarching strategies, rather than providing only brief highlights of all the strategies¹. The First 2010 Biannual Report provided details on the activities under Strategy Four: Strengthening Families at Risk. This report provides summary program statistics for all the overarching levy strategy areas, but also continues the approach of highlighting the accomplishments of one of the five levy overarching strategies by offering a focused look at Strategy Five: Resource Management and Evaluation. It provides a progress report on the implementation through the second quarter 2010 of the nine activities identified in the VHS Levy Service Improvement Plan (SIP) related to increasing the effectiveness of resource management and evaluation activities. These activities are implemented both by community-based providers and by King County staff.

¹ The first quarter 2009 report focused on Strategy One: Increasing Access to Services for Veterans; The focus second quarter report focused on Strategy Two: Ending Homelessness through Outreach, Prevention, Permanent Supportive Housing and Employment; and the third quarter report focused on Strategy Three: Increasing Access to Behavioral Health Services.

Background

King County Ordinance 15279, approved in September 2005, placed before the voters a measure to create the VHS Levy. The ballot measure authorized King County to levy an additional property tax of five cents per \$1,000 of assessed value for a period of six years. The ordinance stipulated that the levy proceeds would be split equally, with one-half dedicated to assist veterans, military personnel and their families, and the other half to help other individuals and families in need. The voters of King County overwhelmingly approved the levy in November 2005.

The county established two citizen oversight boards as called for in the ordinance, and also developed the SIP required by the council to serve as the overarching policy and service plan for expending levy proceeds. The SIP was submitted to the council in September 2006 and approved the following month. The two boards, the Regional Human Services Levy Oversight Board (RHSLOB) and the Veterans Citizen Levy Oversight Board (VCLOB), were convened in February 2007. Throughout 2007, 2008 and 2009, the boards worked on their assigned responsibilities of reviewing a multitude of activity-specific implementation plans, serving on many RFP review panels to select community service providers, and receiving briefings on the implementation of levy activities. With only a very few activity plans and RFP processes remaining to be conducted in 2010, board activities turned to oversight of levy activities, making selected site visits, reviewing progress reports on individual levy activities and educating the public on the VHS Levy and its accomplishments.

The SIP, approved by the council through Ordinance 15632, created five overarching strategies to enhance programs and services to help veterans and their families and other low-income residents throughout the county. These overarching strategies include the following:

Strategy One: Enhancing Services and Access for Veterans (Veterans Levy Fund

only)

Strategy Two: Ending Homelessness through Outreach, Prevention, Permanent

Supportive Housing and Employment

Strategy Three: Increasing Access to Behavioral Health Services

Strategy Four: Strengthening Families at Risk (Human Services Levy Fund only)

Strategy Five: Increasing Effectiveness of Resource Management and Evaluation.

Each of the five strategies includes several activities. There are 31 activities in all, each specified in the SIP. Detailed plans for implementing each of these activities were prepared by staff, made available for public review and comment, and closely reviewed by the citizen oversight boards. These plans, as well as annual reports on the accomplishments of the activities, can be viewed on the levy website at: http://www.kingcounty.gov/DCHS/Levy.

Financial update (as of June 30, 2010)

King County Ordinance 15632 created two separate funds for VHS Levy proceeds: a Veterans Levy Fund and a Human Services Levy Fund. Proceeds from the levy are split equally into these two funds. Almost all of the 31 individual SIP activities have progressed from the required board and public review, through the RFP process, and ultimately, to contracting and expenditure of the funds. Each of these activities is funded by either the Veterans Levy Fund or the Human Services Levy Fund, or in many cases, both.

The RHSLOB and the VCLOB have reviewed the plans for each levy activity and carefully considered feedback from the public, which is a required step before making the funds available. By the end of second quarter 2010, a total of \$66.1 million (99.7 percent) of all available program funds had been committed to agencies providing services in the community. A total of \$36.6 million (55.3 percent) has been expended. Expenditures will always lag the provision of services, as King County pays on a reimbursement basis after the services have been provided in the community. A total of 24 RFP processes have been conducted to date to disburse levy funds. An RFP process to select agencies to provide additional outreach services to women veterans and veterans of color began in late 2009 and was completed this spring. Contracts are currently being negotiated with the selected agencies.

With nearly all of the available funds committed, the levy dollars are being put to work in the community. For the Veterans Levy Fund portion, as of the end of second quarter 2010 a total of \$32.4 million (99.7 percent) of the available dollars were committed to agencies providing services in the community, or allocated to expanding the range and capacity of the King County Veterans' Program (KCVP). Of the \$32.4 million, \$17.9 million (55.1 percent) has been expended.

For the Human Services Fund portion, \$33.7 million (99.7 percent) has been committed to agencies providing services in the community, or allocated to expanding the capacity of specified internal programs, such as the Nurse Family Partnership (NFP) operated by Public Health – Seattle & King County. Of the \$33.7 million, \$18.7 million (55.5 percent) has been expended.

Number/geographic distribution of those served during first and second quarter 2010

The budget proviso indicated that this second biannual report should cover the time period of April 2010 through July 2010. However, demographic, service and outcome data from community-based contractors is received on a quarterly, not monthly, basis. Consequently, data on the entire first quarter, January through March 2010, is provided in this report, along with available data from the second quarter. The Department of Community and Human Services (DCHS) Community Services Division will not receive third quarter 2010 data until after October 2010, too late to be included in this report due by August 30, 2010. As a result, we are continuing with the approach used in the first biannual report of providing data in half-year increments.

As the following chart indicates, a total of 20,910 individuals in King County received Veterans and Human Services Levy funded services during the first six months of 2010 based upon data available by June 30, 2010.

Number of Clients Served by Overarching Strategies January – June 2010

Strategy	Number
	Served*
One: Enhancing Services and Access for Veterans	2,336
Two: Ending Homelessness Through Outreach, Prevention, Permanent	3,793
Supportive Housing and Employment	
Three: Increasing Access to Behavioral Health Services	2,623
Four: Strengthening Families at Risk	12,158
Total Served	20,910

^{*}Number of clients served may be artificially high for January through June 2010 as clients from the previous year are typically considered "new" clients at the beginning of each year.

Number and Percent of Clients Served by Region January – June 2010

Region	Number of Clients	Clients Served as Percent of All
G	Served	Clients Served
North	591	2.8
East (urban)	2,258	10.8
East (rural)	490	2.4
Total North and East	3,339	16.0
Seattle	8,834	42.2
South (urban)	6,662	31.9
South (rural, including Vashon)	1,655	7.9
Total South	8,317	39.8
Other*	420	2.0
Total	20,910	100

^{*}Includes homeless, address of residence if outside King County or undetermined

Focus on Strategy Five: Increasing the Effectiveness of Resource Management and Evaluation

The SIP allocated the vast majority of the levy's estimated \$86 million in revenue over the life of the levy to fund capital projects and direct services under the overarching strategies one through four. A small amount, about \$5.6 million (seven percent of the original SIP allocation), was reserved for resource management, planning and evaluation to measure the results of the levy. These activities help ensure levy funds are well spent and invested in effective interventions that support the overarching levy goals.

A total of nine activities were identified in the SIP under strategy five. Many of these were one-time activities. The plans for these activities, as well as all the VHS Levy activities, may be viewed on the levy's website at: www.kingcounty.gov/DCHS/Levy/

The nine activities identified in the SIP under Strategy Five: Increasing the Effectiveness of Resource Management and Evaluation were grouped in the SIP under the following three broad categories:

- Planning and evaluation
- Information systems
- Enhancement of collaboration and coordination

This report provides an update on each of the activities in these categories. The first category of activities under strategy five identified in the SIP is related to planning and evaluation. Four activities are included in this category.

Activity 5.1: Comprehensive process and outcome based evaluation of levy activities

The SIP identified evaluation of levy-supported programs and services as a critical part of managing the levy. According to the plan, evaluation would not only assist in guiding the investments to ensure effective use of levy resources, but also determine the success of levy-funded efforts.

Activity 5.1 has been implemented through the Community Services Division Evaluation and Performance Measurement Unit that oversees the coordination and reporting of levy activity evaluations and performance data. Their work has been guided by the SIP, the 2007 Veterans and Human Services Levy Evaluation Framework Working Document and the evaluation matrix. These documents are posted on the levy website.

The evaluation framework describes the activities necessary to evaluate the impact of levy funding and presents a model for comparing program service activities to the established levy goals. The evaluation matrix is built upon the stated goals and objectives identified in the SIP and serves to identify the performance and outcomes measures for all levy funded activities. These measures have been integrated into all contracts and provide the basis for performance reporting.

Second 2010 Biannual Report

The SIP identified several underlying principles to guide evaluation efforts including the following:

- Measure results as they relate to outcomes and impacts with individuals stated as project goals and objectives.
- Where a project approach is a best practice, verify it is implemented based upon the best practice guidelines as stated.
- Leverage existing evaluation activities and coordinate with other information systems. Where an evaluation is in place, use it or add to it.
- For projects where long-term outcomes are measured years away (i.e. successful childhood development) find intermediate outcome or process outcome to show the program is on course to achieving results.
- Coordinate evaluation with levy contract management activities. Build process and outcome data collection into ongoing monitoring functions and support regional coordination of data collection efforts.
- Ensure evaluation process, products and reports are accessible and understandable to a broad array of community stakeholders and policymakers.

The SIP clearly identifies the levy target populations:

- Veterans, military personnel and their families in need
- Individuals and families experiencing long-term homelessness who may be frequent users of expensive emergency and other community services
- Individuals recently released from prison or jail including those striving to maintain their family or re-unite with their children
- Families and young children who are at risk for homelessness or involvement with child welfare, behavioral health or justice systems.

Page vi of the SIP listed several important desired results of the levy. These are discussed below with examples of ways in which the levy is proving successful in meeting these desired results.

Veterans and their families throughout King County are accessing a fuller array of services to promote their health and wellbeing.

Levy investments in strategy one activities have succeeded in providing a broad array of services both directly by the KCVP and through community-based contracts to veterans and their families in communities throughout King County.

Second 2010 Biannual Report

- Levy funds have provided increased services including financial assistance, shelter services, Post Traumatic Stress Disorder treatment for veterans and their families, and expanded the Veterans Incarcerated Project.
- Levy funds have provided new services in King County, including case management services, National Guard Assistance, Veterans Conservation Program, and development of the Military Kids Curriculum for use in public schools.
- Service sites were expanded and services to veterans and their families are now available at a satellite office in Renton and 22 outreach sites. In addition, services are available in new geographic areas throughout the county.

Reductions in criminal justice involvement and emergency medical service use among homeless people who were previously high users of those services.

Evaluation results are demonstrating the levy's success in reducing the use of costly services through investments in permanent supportive housing and in King County Criminal Justice Initiatives.

- Plymouth Housing Group's Simons Senior Apartments, which received levy funds, reports their housing first approach resulted in reductions in the use of emergency medical and sobering services. For residents enrolled in their veterans program, sobering center contacts went from 926 visits by 20 people the year prior to housing to 20 visits by 4 people the first year they were housed. In addition, Veterans Administration (VA) emergency department contacts fell by 59 percent, VA hospital admissions fell 65 percent and hospital days fell by 84 percent.
- The Forensic Intensive Supportive Housing project assisted 42 severely mentally ill, justice-involved persons move into housing and achieve stability. This evidence-based model predicts the justice and intensive service involvement of participants will be curtailed significantly.

Local governments working together in a coordinated approach to identify, engage and house homeless individuals and families with supportive services linked to housing.

Levy funds have been successfully braided with federal, state and local dollars to provide permanent supportive housing units and helped identify, engage and house homeless individuals and families.

- Levy funds are providing a total of 543 new housing units throughout King County, in a variety of jurisdictions.
- Safe Harbors has a total of 287 of the publicly funded homeless service programs providing data to the homeless management information system, an increase of 117 agencies from those participating in 2007.
- A high utilizer database has begun identifying individuals to be housed in newly available housing units, such as McDermott Place.

Second 2010 Biannual Report

Previously homeless individuals and families off the streets and living in stable supportive housing.

The levy has provided an array of supportive services helping individuals and families stabilize housing.

- Over 1,916 formerly homeless individuals are maintaining their permanent housing through levy investments in health care, case management, chemical dependency and mental health treatment.
- The levy has provided 543 new permanent housing units to serve formerly homeless individuals and families.

Improved job readiness and increased employment rates.

Levy-funded education and employment services linked to supportive housing succeeded in helping individuals improve their job readiness and increase their employment.

- A total of 792 homeless or at-risk individuals were enrolled in education and employment services linked to supportive housing and 431 either secured a job or met their job goals.
- A total of 67 percent either retained their jobs for over three months or increased their income.

Increased access to mental health and substance use treatment.

The levy succeeded in filling gaps in behavioral health services helping thousands access mental health and substance use services.

- Mental health and chemical dependency services integrated into primary care clinics assessed 7,476 individuals receiving services at primary care clinics in 2009. These are individuals who would likely not have been assessed without this levy-funded activity. Of those assessed positive for mental health needs, 2,435 were enrolled in treatment.
- Of those enrolled in treatment, a total of 38 percent scored lower for depression, a
 positive result similar to results achieved by other programs implementing this IMPACT
 evidence-based model.

Parents involved with the criminal justice system are able to receive the services and supports they need to stay out of jail, get jobs and reunite with their families.

Three levy activities were combined to provide intensive wrap around services to support the unification of these families.

- Integrated services to these parents and their children began in September 2008.
- During 2009, a total of 443 families were contacted regarding potential enrollment in this activity and 29 families were enrolled.

Second 2010 Biannual Report

• Enrolled parents have received over 3,000 hours of case management services. Recidivism, employment, and re-unification outcomes are being tracked and will be presented in 2011.

Families with young children able to access the services and supports they need to promote healthy child development and wellbeing, school-readiness and pathways to a healthy journey from youth to adulthood.

The levy funded several evidence-based early intervention and prevention strategies and promising practices that improved birth outcomes, maternal-child attachments, healthy child development, school readiness and reduced the likelihood of involvement in the child welfare system.

- The levy funded NFP services for 133 low-income, first-time mothers of whom 90 percent delivered an infant at term with a healthy birth weight.
- During 2009, almost 7,000 parents, caregivers and children attended Family and Friends Network - Play and Learn groups, representing 2,492 unduplicated families. A total of 73 percent of participating parents and caregivers increased their knowledge of caregiver roles and child behavior that promotes healthy and nurturing caregiver-child relationships.

Easier access to culturally and linguistically competent services.

The levy funded culturally and linguistically competent services, helping reduce the isolation experienced by new immigrants and other cultural groups.

- The Cultural Navigator Program provided information on services to 835 individuals, increasing access to culturally appropriate services for 92 percent of these individuals.
- Services are offered in multiple languages including Chinese (Mandarin and Cantonese), Spanish, Vietnamese, Russian and Punjabi.

While more data will be evaluated in the remaining years of the levy, it is clear the levy has already demonstrated success in serving the target populations and in meeting the goals outlined in the SIP. Future performance and outcome information will be combined with this interim data to provide a more complete picture of the levy's success. Ultimately, evaluation results will help the public determine if the results of the levy merits renewal in 2011.

Activity 5.2: Cross-systems planning and start-up initiatives for youth aging out of the foster care system

Gaps in housing and supportive services for youth aging out of foster care pose numerous problems for King County and increase the risk of homelessness, substance abuse, and criminal justice system involvement for these youth. The SIP specified one-time dollars to plan cross-system coordination involving systems such as child welfare, juvenile justice, mental health, substance abuse, employment and housing for these young people.

A variety of work groups have been engaged in planning services for this population and developing a strategy for implementation, including Uniting for Youth and the Committee to End Homelessness in King County (CEHKC). The CEHKC is exploring approaches to better link the Washington State Division of Children and Family Services, school districts, and homeless services providers to better prepare youth aging out of foster care, and the funds will be used in that context.

Activity 5.3: create a profile of offenders in King County with mental illnesses and co-occurring substance use disorders

Individuals with mental illness and/or chemical dependency may be homeless, involved in the criminal and juvenile justice systems, or using other expensive publicly funded services such as inpatient, or emergency services. Understanding more about this population and their needs is the first step to planning appropriate services to meet those needs. The SIP set a goal of gathering and analyzing data regarding individuals with mental illness and co-occurring substance use disorders who are involved in the criminal and juvenile justice systems.

The DCHS, Mental Health Chemical Abuse and Dependency Services Division (MHCADSD) used one-time levy funding to create a profile by evaluating available data on this population. The report, known as the Prevalence Study, was completed in 2007 and it is available in its entirety under Activity 5.3 on the levy website.

The report provided a variety of local statistics on individuals with mental illness and cooccurring substance use disorders. This data provided valuable information for service planners and potential funders of service to assist them in targeting resources to better meet the needs of these populations. Highlights of the report include the following:

- Users of the justice system: during 2003 2005, approximately five percent (~1,500/yr) of unduplicated people released from King County jails had at least one indicator of mental illness, either housing on the mental health unit of the jail, or some indication about the status of the person's mental competency. These individuals accounted for ~3,500 bookings. During 2004 2006, a report of jail high-utilizers indicated that misdemeanants with either of these mental illness indicators accounted for 64 percent of the 794 people with five or more bookings within 12 months (rapid-cyclers) and 59 percent of the 957 people with either two or more 30-day plus bookings.
- Users of emergency services: the 300 highest utilizers of Harborview's emergency department had 8,016 admissions in 2005. (There were about 78,000 total emergency department admissions.)
- Homeless persons: the 2006 One Night Count data indicates that of the 5,963 homeless individuals counted in shelters and transitional housing, 1,228 (21 percent) met a broad definition of mental illness, 585 (10 percent) were considered to have a serious mental illness and 95 (2 percent) had been released from a psychiatric hospital in the last year. In addition, 1,262 (21 percent) were considered to be abusing substances, with 760 (13 percent) considered to be seriously abusing substances. In 2006, of the 2,100 people

Second 2010 Biannual Report

admitted to the Dutch Shisler Sobering Support Center, 89 percent were homeless on at least one admission.

Activity 5.4: planning, training and service design efforts

The SIP recognized that new service strategies may need to be developed or current ones refined to adequately meet constituent needs. A small investment was made to ensure funds were available to respond to unexpected events and creative opportunities.

The funds allocated to this activity are being reserved to develop a revised six-year levy service design document for the potential renewal of the levy. Funds will be used to gather information from stakeholders on the design of services, to research best practices and develop the implementation plan for the next levy. Work on the revised plan is slated to begin in the fall of 2010, with completion by late spring 2011.

Three activities under strategy five were devoted to information systems, including activities 5.5, 5.6 and 5.7, which are discussed below.

Activity 5.5: Facilitate the Homeless Management Information System

The SIP recognized the importance of the Homeless Management Information System (HMIS) as a means to learn more about the nature, patterns and extent of homelessness in King County as well as the needs of those in our communities who are homeless. It recognized that modifications to Safe Harbors would be needed to simplify the provider's task of entering data along with training and technical assistance to ensure efficient data, entry and accurate data. Levy funds have been invested to provide effective implementation and management of the HMIS.

To date, levy funds have been used to:

- Assist agencies to review and enter current and archival data in the new HMIS application.
- Augment agency data collection and services approaches to assist them in the move to the new HMIS application.
- Bring the new application on line with 287 participating programs. These include over 90 percent of publicly-funded programs providing homeless services.
- Use the improved technology in Safe Harbors to create new service coordination strategies for individuals and families (including veterans and others in need) across programs and agencies.

Accomplishments achieved during 2009 include the following:

• Nearly 200 users were trained and supported.

• The Safe Harbors pilot was completed and full implementation of the system began in April 2009.

• Sixty-three percent of programs were using the new HMIS in December 2009.

Levy funds, which are time-limited and decline in the out years, will be used specifically to cover the one-time, or short-term, agency related costs of preparation for migration, including training key staff and mitigating the burden of implementation at the agency level.

Activity 5.6: Enhance Department of Community and Human Services information systems to support administration and evaluation of the levy

Under the VHS Levy, the KCVP changed its program design to incorporate comprehensive assessment, case management and enhanced linkages to other social services. The changes in the business model and performance reporting required substantial changes to the existing information system that were implemented under this activity.

Levy evaluation staff worked with KCVP staff and database programmers to match the information system to the evolving program service model. This enabled better program management and outcome measurement to assess KCVP's success in meeting the VHS Levy objectives. Management at KCVP, levy evaluators and information technology programmers worked throughout the year to revise the veterans' information system, known as Veteran's Information Base Electronic (VIBE), so that it supported the KCVP's new VHS Levy-funded service model. This entailed clarification of program protocols and business requirements, assessment of the exiting information system, development of new reporting forms, intensive database programming, database testing and staff training in the new system.

Information system enhancements continue in 2010. Case planning support, service/referral tracking and client goal attainments were added in spring 2010. Throughout 2010, improved reporting functionality is being added to inform program management, levy board oversight and evaluation.

Specific achievements to date include the following:

- A client assessment module has been added
- A new client identification schema has been incorporated into the VIBE
- A client self-sufficiency assessment has been added
- Hard copy client files and electronic files have been synchronized

Activity 5.7: Consultation and training related to information sharing

The Health Insurance Portability and Accountability Act (HIPAA) and other statutes pertaining to confidentiality of patient records and information sharing have constrained potential collaboration among a variety of systems in King County. The restrictions of HIPAA were never meant to prevent access to needed care, but rather to protect the privacy of individual patients.

Second 2010 Biannual Report

Numerous jurisdictions across the country have taken advantage of training and technical assistance offering lawful strategies to increase information sharing that improves service delivery to clients involved in multiple systems. A small investment of levy funds was made to promote this expertise among systems in King County.

Levy funds were provided to the MHCADSD to implement this activity. It was assumed a competitive process would be needed to obtain a consultant to assist in implementing this activity; however, an in-house expert was identified - the DCHS Privacy Officer (PO) - who was knowledgeable in information sharing. This position has assumed responsibility for implementing this activity and has engaged in a number of activities related to information sharing, including the following:

- Initiating discussions with several key stakeholders to develop data sharing agreements
- Engaging with staff in the Civil Division of the King County Prosecuting Attorney's Office for consultation and technical assistance
- Serving on the Partnership for Health Improvement through Shared Information (PHISI) (described below under activity 5.8), as a board member and membership on the PHISI Privacy and Security Committee
- Developing systems and policies for appropriate DCHS staff and external partners to apply for records access and to work with electronic protected health information via secure email and secure servers
- Developing a presentation on new record keeping and breach notification requirements of new HIPAA regulations

Activities that will take place in the coming year and a half include the following:

- Finalizing data sharing agreements, including one for access to HMIS data
- Managing MHCADSD access to HMIS raw data
- Learning the intricacies of the new HIPAA regulations
- Providing training to county and partner agency staff on new HIPAA regulations
- Providing consultation and technical assistance to partner agencies on privacy issues
- Managing the client care coordination process and the use of client candidate lists for lease-up to assure compliance with all privacy requirements under HIPAA and 42 Code of Federal Regulations (CFR)
- Developing new protocols and policies as needed to assure compliance with all privacy requirements under HIPAA and 42 CFR.

The last category of activities under strategy five is related to enhancing collaboration and coordination among agencies. Activities 5.8 and 5.9 were identified in this category and are discussed below.

Activity 5.8: Develop common data set for assessment for those seeking a range of housing, health and human services

Cross-systems coordination and service integration is often hampered by the absence of standardized tools and data elements to collect service needs data on adults, youth and families. Funds under this activity are dedicated to developing approaches to assess the needs of clients entering a variety of systems, including community health clinics, behavioral health and housing services. The development of common data elements minimizes the duplication of intake efforts across multiple systems.

Some funds under this activity were allocated to support the development of PHISI, a health information exchange that will improve the efficiency of care provided to people who use more than one service system. The goal of PHISI is to create a regional system whereby all medical and service providers serving safety net populations may electronically share client health information in order to reduce duplication in treatment, testing and record keeping. Information that would make a huge difference in coordinating care include: name (first and last) and contact information, provider names, medication, discharge summaries, problem lists, prior visits and treatment plans.

The PHISI has made great progress during 2010 including executing a contract with the Foundation for Health Care Quality (FHCQ) to prepare a business plan to include project scope, governance, services, exchange partners, technology plan, risk management, privacy, and marketing. The FHCQ has contracted with a well-known health information exchange expert to complete the technology and financing section of the business plan. The business plan is slated to be finalized by the end of September 2010.

Activity 5.9: Facilitation of ongoing partnerships

Recognizing the importance of reducing fragmentation of services, supporting the braiding of resources and integrating services, the SIP dedicated a small amount of funding to increase partnerships.

These funds support a term-limited temporary (TLT) position focused on the development of a variety of collaborative relationships, including a newly-formed collaboration between the Puget Sound Educational Services District (PSESD), King County and the Washington Department of Veterans Affairs to develop a curriculum to support children of military families in the schools. The curriculum has been completed, piloted and is in the process of being implemented in schools with the assistance of the PSESD.

During 2009 and 2010, presentations were made to numerous city councils, unincorporated area councils and human services commissions throughout King County to educate them on the levy and levy-funded services in their communities. The TLT also helped facilitate an RFP designed to expand outreach activities for women veterans and veterans of color, completed spring of 2010. In addition, these funds have been used to help support an annual conference on the children of military families. During the remaining years of the levy, these funds will help support the development of a revised six-year levy service design document.

Conclusion

As this progress report on the implementation through second quarter 2010 indicates, the nine levy activities funded under Strategy Five: Increasing the Effectiveness of Resource Management and Evaluation are helping ensure levy funds are invested wisely in an array of effective services. These activities are helping improve the efficiency of information systems, supporting planning for improved services, and promoting enhanced collaborations among a variety of service systems. While evaluation of levy-funded activities is ongoing, it is clear that significant progress is being made in meeting levy goals outlined in the SIP, resulting in positive impacts on the lives of individuals and families throughout our community.



Attachment A

Veterans and Human Services Levy Funds 1141 and 1142

Consolidated Second Quarter 2010 Financial Status Report																
				Step 1			Step 2	Step 3				Step 4				
Strategy	Program Dollars Per Pla 2010		Program Dollars Per Pl 2006-2010	Board/Public review status as of 6/301/10		RFP or Other Process		2010 Funds Committed *		2006-2010 Funds Committed *		2006-2009 Cumulative Expenditures		t Half 2010 imulative penditures	Life to Date Cumulative Expenditures (including 1st Half 2010)	
Overarching Strategy 1: Veterans	_				١.			١.		١		_		_		
1.1 Expand geographic range of the King County Veterans' Program			\$ 2,274,84		\$	2,274,848	Completed	\$	789,939		2,274,848		213,368	\$	-	\$ 213,36
1.2 Increase capacity of the King County Veterans' Program			\$ 9,862,36		\$	9,862,360	Completed	\$	2,413,640		9,862,360	\$	5,835,525	\$	940,690	\$ 6,776,210
1.3 Phone resource for veterans			\$ 400,00		\$	400,000	Completed	\$	100,000	\$		\$	-	\$	-	\$ -
1.4 Provide training & info re: VA linkages	\$	40,000	\$ 160,00	Under Discussion	\$	-	NA	\$	40,000	\$	160,000	\$	-	\$	-	\$ -
Overarching Strategy 2: Homelessness			_		١.			١.		١.						
2.1 Initiatives to identify/engage/house long term homeless			\$ 2,930,00		\$	2,930,000	Completed	\$	820,000			\$	1,474,962	\$	85,395	\$ 1,560,35
2.2 Increase permanent housing w/support services	\$ 1,3		\$ 15,143,50		\$	15,143,507	Annual RFP	\$	1,326,725			\$	11,296,386	\$	1,291,284	\$ 12,587,670
2.3 Landlord risk reduction	\$		\$ 1,000,00		\$	1,000,000	Completed	\$	-		1,000,000		2,663	\$	3,859	\$ 6,52
2.4 Investment in support services for housing		,	\$ 5,000,00		\$	5,000,000	Annual RFP	\$	1,250,000		5,000,000			\$	162,317	\$ 1,096,610
2.5 KCCJI housing/services	\$ 5	00,000	\$ 2,000,00	Completed	\$	2,000,000	Completed	\$	500,000	\$ 2	2,000,000	\$	835,000	\$	-	\$ 835,000
						000 0		1	440.0	I _		_		•	0.4.05-	
2.6 Perm housing placement suppt/CJ parents exiting transitional hsg		.,	\$ 330,00		\$	330,000	Completed	\$				\$	- , -	\$	24,953	\$ 86,079
2.7 Housing stability program			\$ 4,000,00		\$	4,000,000	Completed	\$	1,000,000			\$		\$	264,028	\$ 1,981,910
2.8 Link education & employment to supportive housing	\$ 1,0	00,000	\$ 3,550,00	Completed	\$	3,550,000	Completed	\$	1,000,000	\$ 3	3,550,000	\$	1,478,089	\$	277,877	\$ 1,755,966
Overarching Strategy 3: Behavioral Health					١.			١.		١		_		_		
3.1 Integrate MH/CD into primary care clinics			\$ 5,000,00		\$	5,000,000	Completed	\$	1,300,000			\$	2,850,714	\$	-	\$ 2,850,71
3.2 Training programs in trauma sensitive & PTSD treatment			\$ 300,00		\$	300,000	Completed	\$	75,000	\$	300,000		-	\$	-	\$ -
3.3 Train behavioral health providers in PTSD			\$ 1,000,00		\$	1,000,000	Completed	\$	250,000			\$	166,000	\$		\$ 166,000
3.4 In-home services to treat depression in elderly vets, others	\$ 1	96,000	\$ 700,00	Completed	\$	700,000	Completed	\$	196,000	\$	700,000	\$	419,967	\$	56,000	\$ 475,96
Overarching Strategy 4: Strengthening Families									E0E 000	١.		•		•		
4.1 Nurse Family Partnership			\$ 1,937,50		\$	1,937,500	Completed	\$	535,000		1,937,500		1,429,670		48,943	\$ 1,478,613
4.2 Pilot new services for maternal depression			\$ 2,000,00		\$	2,000,000	Completed	\$	500,000		2,000,000			\$	-	\$ 1,211,63
4.3 Early childhood intervention/prevention	\$ 4	93,000	\$ 1,972,00	Completed	\$	1,972,000	Completed	\$	493,000	\$ 1	1,972,000	\$	1,150,587	\$	-	\$ 1,150,58
4.4 Early intervention support for parents exiting CJ/in transitional hsg	\$ 2	80,000	\$ 840,00	Completed	\$	840,000	Completed	\$	280,000	\$	840,000	\$	297,607	\$	76,897	\$ 374,500
4.5 Invest in education and employ for single parents exiting CJ			\$ 450,00		\$	450,000	Completed	\$	150,000	\$		\$		\$	40,368	\$ 83,012
4.6 Family Treatment Court	\$ 2	25,000	\$ 650,00	Completed	\$	650,000	NA .	\$	225,000	\$	650,000	\$	321,755	\$	50,390	\$ 372,14
Overarching Strategy 5: Resource Management and Evaluation					1			1					•		-	
5.1 Evaluation	\$ 3	50,000	\$ 1,600,00	Completed	\$	1,600,000	NA	\$	350,000	\$ 1	1,600,000	\$	351,459	\$	168,014	\$ 519,473
5.2 Cross system planning/Youth	\$	-	\$ 250,00	Under Discussion	\$		NA	\$	-	\$	250,000	\$	-	\$	-	\$ -
5.3 Profile of offenders with MH & COD	\$	-	\$ 120,00	Completed	\$	120,000	Completed	\$	-	\$	120,000	\$	120,000	\$	-	\$ 120,000
5.4 Planning, training, service design efforts	\$ 1	00,000	\$ 300,00	Scheduled Sept 2010	\$		NA .	\$	100,000	\$	100,000	\$	-	\$	-	\$ -
5.5 Safe Harbors	\$ 1	50,000	\$ 975,00	Completed	\$	975,000	Completed	\$	150,000	\$	975,000	\$	457,440	\$	-	\$ 457,440
5.6 Information systems	\$	-	\$ 350,00	NA .	\$	-	NA .	\$	-	\$	350,000	\$	-	\$	-	\$ -
5.7 Consultation and training (HIPAA)	\$	-	\$ 150,00	Completed	\$	150,000	Completed	\$	-	\$	150,000	\$	-	\$	-	\$ -
5.8 Common data set	\$	60,000	\$ 440,00	Completed	\$	440,000	NA	\$	60,000	\$	440,000	\$	-	\$	-	\$ -
5.9 Facilitation of ongoing partnerships			\$ 600,00		\$	600,000	Completed	\$	150,000	\$	600,000	\$	433,102	\$	52,317	\$ 485,419
Subtotal:	\$ 14,1	64,304	\$ 66,285,21	5	\$	65,225,215		\$	14,164,304	\$ 66	5,085,215	\$	33,101,882	\$	3,543,333	\$ 36,645,21
Percent of available program dollars:		-	\$ -			98.4%		1			99.7%		63.5%		25.0%	55.3
Administration **	\$ 7	69,061	\$ 2,553,65	2				\$	769,061	\$ 2	2,553,652	\$	1,257,130	\$	296,019	\$ 1,553,149
Board Support and Other Miscellaneous Direct Program Costs	¢ 4	94,662	¢ 1.004.90					s	494,662	٫ ا	1,004,805	\$	869,249	\$	225 725	\$ 1,094,97
	φ 4 ¹		\$ 1,004,80					\$	494,662			\$		-	225,725	
Planning, Development and Start-up	P		\$ 1,717,40					\$	4 000 700		.,,	-	,	\$	504 744	Ψ 001,00
Subtotal:			\$ 5,275,86			6E 22E 24E		\$	1,263,723		5,275,865			\$		\$ 3,232,210
Total:	a 15,4	28,027	\$ 71,561,08	וי	\$	65,225,215	l	\$	15,428,027	∣ \$ 71	1,361,080	\$	35,812,348	\$	4,065,077	\$ 39,877,424

^{*}Includes funds committed by Letter of Award, Contract and/or Memorandum of Agreement (MOA), as well as funds committed to expanding the range/capacity of the King County Veterans' Program

^{**}Cumulative levy administration expenses, as a percentage of revenue collections from 2006 to 2009, total 3.34%.



Attachment A

Veterans Services Levy Fund 1141

Consolidated Second Quarter 2010 Financial Status Report

Consolidated Second Quarter 2010 Financial Status Report												
				Step 1	Step 2	Ste	ep 3	Step 4				
Strategy	Progr Dollars P 201	er Plan	Program Dollars Per Plan 2006-2010	Board/Public review RFP or status as of 6/30/10 Proc		2010 Funds Committed *	2006-2010 Funds Committed *	2006-2009 Cumulative Expenditures	First Half 2010 Cumulative Expenditures	Life to Date Cumulative Expenditures (including 1st Half 2010)		
Overarching Strategy 1: Veterans										,		
1.1 Expand geographic range of the King County Veterans' Program	\$ 7	89,939	\$ 2,274,848			\$ 789,939	\$ 2,274,848	\$ 213,368	\$ -	\$ 213,368		
1.2 Increase capacity of the King County Veterans' Program	\$ 2,4	13,640	\$ 9,862,360			\$ 2,413,640	\$ 9,862,360	\$ 5,835,525	\$ 940,690	\$ 6,776,216		
1.3 Phone resource for veterans	\$ 1	00,000	\$ 400,000			\$ 100,000	\$ 400,000	\$ -	\$ -	\$ -		
1.4 Provide training & info re: VA linkages	\$	40,000	\$ 160,000			\$ 40,000	\$ 160,000	\$ -	\$ -	\$ -		
Overarching Strategy 2: Homelessness									•	·		
2.1 Initiatives to identify/engage/house long term homeless	\$ 2	46,000	\$ 879,000			\$ 246,000	\$ 879,000	\$ 425,544	\$ 25,618	\$ 451,162		
2.2 Increase permanent housing w/support services	\$ 6	26,725	\$ 6,626,078			\$ 626,725	\$ 6,626,078	\$ 5,321,374	\$ 437,129	\$ 5,758,503		
2.3 Landlord risk reduction	\$		\$ 500,000			\$ -	\$ 500,000	\$ 1,332	\$ 1,929	\$ 3,261		
2.4 Investment in support services for housing	\$ 3	75,000	\$ 1,500,000			\$ 375,000	\$ 1,500,000		\$ 58,522	\$ 342,847		
2.5 KCCJI housing/services		50,000	\$ 600,000			\$ 150,000	\$ 600,000		\$ -	\$ 250,500		
2.6 Perm housing placement suppt/CJ parents exiting transitional hsg	\$	-	\$ -			\$ -	\$ -	\$ -	\$ -	\$ -		
2.7 Housing stability program	\$ 5	00,000	\$ 2,000,000			\$ 500,000	\$ 2,000,000	\$ 795,954	\$ 126,520	\$ 922,475		
2.8 Link education & employment to supportive housing		00,000	\$ 1,065,000			\$ 300,000	\$ 1,065,000	\$ 377,925	\$ 69,203	\$ 447,128		
Overarching Strategy 3: Behavioral Health			, , , , , , , , , , , , , , , , , , , ,				,,			, ,		
3.1 Integrate MH/CD into primary care clinics	\$ 8	00,000	\$ 3,000,000			\$ 800,000	\$ 3,000,000	\$ 1,600,714	\$ -	\$ 1,600,714		
3.2 Training programs in trauma sensitive & PTSD treatment		22,500	\$ 90,000			\$ 22,500		\$ -	\$ -	\$ -		
3.3 Train behavioral health providers in PTSD		50,000	\$ 1,000,000			\$ 250,000	\$ 1,000,000	*	\$ -	\$ 166,000		
3.4 In-home services to treat depression in elderly vets, others		98,000	\$ 350,000			\$ 98,000	\$ 350,000		\$ 28,000			
Overarching Strategy 4: Strengthening Families	*	,					1	,	,	*,		
4.1 Nurse Family Partnership	\$		\$ -			s -	\$ -	\$ -	\$ -	\$ -		
4.2 Pilot new services for maternal depression	\$		\$ -	Please see the Consolidated Finar	soial Status Donort	\$ -	\$ -	\$ -	\$ -	\$ -		
4.3 Early childhood intervention/prevention	\$	_	\$ -	Flease see the Consolidated Final	iciai Status Report	\$ -	\$ -	\$ -	\$ -	\$ -		
4.4 Early intervention support for parents exiting CJ/in transitional hsg	\$	-	\$ -			\$ -	\$ -	\$ -	\$ -	\$ -		
4.5 Invest in education and employ for single parents exiting CJ	\$	-	\$ -			\$ -	\$ -	\$ -	\$ -	\$ -		
4.6 Family Treatment Court	\$	-	\$ -			\$ -	\$ -	\$ -	\$ -	\$ -		
Overarching Strategy 5: Resource Management and Evaluation	•		*			· ·	·	*	•	•		
5.1 Evaluation	\$ 1	75,000	\$ 800,000			\$ 175,000	\$ 800,000	\$ 175,783	\$ 82,912	\$ 258,695		
5.2 Cross system planning/Youth	\$	_	\$ 125,000			\$ -	\$ 125,000		\$ -	\$ -		
5.3 Profile of offenders with MH & COD	\$	-	\$ 60,000			\$ -	\$ 60,000		\$ -	\$ 60,000		
5.4 Planning, training, service design efforts	\$	50,000	\$ 150,000			\$ 50,000	\$ 50,000		\$ -	\$ -		
5.5 Safe Harbors		45,000	\$ 292,500			\$ 45,000	\$ 292,500		\$ -	\$ 159,175		
5.6 Information systems	\$	-	\$ 175,000			\$ -	\$ 175,000		\$ -	\$ -		
5.7 Consultation and training (HIPAA)	\$	-	\$ 75,000			\$ -	\$ 75,000		\$ -	\$ -		
5.8 Common data set	\$	30,000	\$ 220,000			\$ 30,000	\$ 220,000		\$ -	\$ -		
5.9 Facilitation of ongoing partnerships	\$	75,000	\$ 300,000			\$ 75,000	\$ 300,000	\$ 216,551	\$ 26,159	\$ 242,709		
Subtotal:	\$ 7,0	86,804	\$ 32,504,786			\$ 7,086,804	\$ 32,404,786	\$ 16,108,069	\$ 1,796,683	\$ 17,904,753		
Percent of available program dollars:	,					\$ -	99.7%	63.4%	25.4%	55.1%		
Administration	\$ 3	56,557	\$ 1,209,159			\$ 356,557	\$ 1,209,159	\$ 651,849	\$ 167,999	\$ 819.848		
Board Support and Other Miscellaneous Direct Program Costs		50,445	\$ 574,015			\$ 250,445	\$ 574,015		\$ 180,423	\$ 666,250		
Planning, Development and Start-up	\$		\$ 1,304,884			\$ -	\$ 1,304,884	\$ 520,482		\$ 520,482		
Subtotal:	\$ 6	07,002	\$ 3.088.058			\$ 607.002	\$ 3,088,058	\$ 1,658,158	\$ 348.422			
Total:		93,806	\$ 35,592,844			\$ 7,693,806	\$ 35,492,844	\$ 17,766,228	\$ 2,145,105			
Total.	1 .,0	- 5,000	- 55,552,644			1 .,555,666	00,702,044	÷ 11,100,220	÷ 2,140,100	10,011,002		
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^{*}Includes funds committed by Letter of Award, Contract and/or Memorandum of Agreement (MOA), as well as funds committed to expanding the range/capacity of the King County Veterans' Program



Attachment A

Health and Human Services Levy Fund 1142 Consolidated Second Quarter 2010 Financial Status Report

Step 4 Life to Date Program Program 2010 2006-2010 2006-2009 First Half 2010 Cumulative Strategy Board/Public review RFP or Other Dollars Per Plan Dollars Per Plan Cumulative Funds Funds Cumulative Expenditures 2006-2010 status as of 6/30/10 2010 **Process** Committed Committed Expenditures Expenditures (including 1st Half 2010) Overarching Strategy 1: Veterans 1.1 Expand geographic range of the King County Veterans' Program 1.2 Increase capacity of the King County Veterans' Program 1.3 Phone resource for veterans \$ \$ \$ 1.4 Provide training & info re: VA linkages \$ Overarching Strategy 2: Homelessness 2,051,000 \$ 2.1 Initiatives to identify/engage/house long term homeless 574,000 \$ 2,051,000 574,000 1,049,418 \$ 59,777 1,109,195 5,975,012 \$ 2.2 Increase permanent housing w/support services 700,000 \$ 8,517,429 700.000 8,517,429 854,155 6,829,167 2.3 Landlord risk reduction 500 000 500.000 1.332 \$ 1 929 3 261 2.4 Investment in support services for housing 875,000 \$ 3,500,000 875,000 3,500,000 649,968 103,795 753,763 2.5 KCCJI housing/services 350,000 \$ 1,400,000 350,000 1,400,000 584,500 584,500 2.6 Perm housing placement suppt/CJ parents exiting transitional hsg \$ 110,000 \$ 330,000 110,000 330,000 61,126 \$ 24,953 86,079 2,000,000 2,000,000 2.7 Housing stability program 500,000 500,000 921,933 \$ 137,508 1,059,441 2.8 Link education & employment to supportive housing 700,000 \$ 2,485,000 700,000 2,485,000 \$ 1,100,164 \$ 208,674 1.308.838 Overarching Strategy 3: Behavioral Health 3.1 Integrate MH/CD into primary care clinics 500,000 \$ 2,000,000 500,000 2,000,000 \$ 1,250,000 1,250,000 3.2 Training programs in trauma sensitive & PTSD treatment 52,500 \$ 210,000 52,500 210,000 3.3 Train behavioral health providers in PTSD 3.4 In-home services to treat depression in elderly vets, others 98,000 \$ 350,000 98,000 350,000 195,967 28,000 223,967 Overarching Strategy 4: Strengthening Families 4.1 Nurse Family Partnership 535.000 \$ 1.937.500 535 000 1.937.500 1.429.670 \$ 48.943 1 478 613 4.2 Pilot new services for maternal depression 500,000 \$ 2,000,000 500,000 2,000,000 1,211,638 \$ 1,211,638 Please see the Consolidated Financial Status Report 4.3 Early childhood intervention/prevention 493,000 1,972,000 493,000 1,972,000 1,150,587 1,150,587 4.4 Early intervention support for parents exiting CJ/in transitional hsg 280,000 \$ 280,000 840,000 297,607 \$ 76,897 374,503 840.000 4.5 Invest in education and employ for single parents exiting CJ 150,000 \$ 450,000 150 000 450.000 42,644 \$ 40.368 83 012 321,755 \$ 4.6 Family Treatment Court 225.000 \$ 650,000 225.000 650,000 50.390 372,145 Overarching Strategy 5: Resource Management and Evaluation 5.1 Evaluation 175,000 \$ 800,000 175,000 800,000 175,676 85,102 260,779 5.2 Cross system planning/Youth 125,000 125,000 5.3 Profile of offenders with MH & COD 60,000 \$ 60,000 60,000 60,000 5.4 Planning, training, service design efforts 50,000 \$ 150,000 50,000 50,000 5.5 Safe Harbors \$ 105,000 \$ 682,500 105,000 682,500 298,265 298,265 175,000 175,000 5.6 Information systems 5.7 Consultation and training (HIPAA) 75,000 75,000 -30,000 \$ 5.8 Common data set 220,000 30,000 220,000 5.9 Facilitation of ongoing partnerships 300,000 242,709 75,000 300,000 75,000 216,551 26.159 Subtotal: 7,077,500 \$ 33,780,429 7.077.500 33.680.429 16.993.812 \$ 1.746.650 18.740.462 Percent of available program dollars 99.79 63.6% 24.79 55.5% 733.302 1 344 493 605 281 128 020 Administration 412 504 \$ 1.344.493 412 504 Board Support and Other Miscellaneous Direct Program Costs 244,217 \$ 430,790 244,217 430,790 383,422 \$ 45,302 428,723 412,524 63,605 63,605 Planning, Development and Start-up 412.524 Subtotal: \$ 656,721 2,187,807 656,721 2,187,807 1,052,308 173,322 1,225,630 19.966.092 Total: \$ 7,734,221 \$ 35,968,236 7.734.221 18.046.120 \$ 1.919.972 35,868,236 \$

*Includes funds committed by Letter of Award, Contract and/or Memorandum of Agreement (MOA), and programmatic commitments.